

Revised REG 227 and REG 166 Forms

Issue Date: April 2, 2012

New Information

The Application for Duplicate Title or Paperless Title (REG 227) and Lien Satisfied/Legal Owner/Title Holder Release (REG 166) forms have been revised (samples attached).

Procedures

Immediately order the revised REG 227 (REV. 1/2012) and REG 166 (REV. 1/2012) forms using existing procedures available online at **www.dmv.ca.gov**. Continue to use prior versions of the REG 227 and REG 166 until you receive the revised forms. Upon receipt of the revised REG 227 and REG 166 forms, immediately destroy prior versions.

Background

The REG 227 and REG 166 forms were revised to decrease the amount of fraudulent lien releases submitted to the department.

Reference

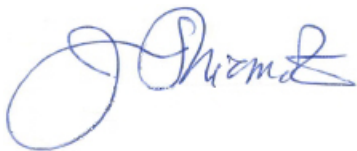
VIN 2011-44 New Lien Release Requirements for REG 227

Distribution

Notification that this memo is available online, at **www.dmv.ca.gov** under Publications was made via California DMV's Automated E-mail Alert System in March 2012.

Contact

Call the DMV Customer Communications Section, at (916) 657-6560 for further clarification of this memo. Upon request, this document can be produced in Braille or large print.



JEAN SHIOMOTO, Deputy Director
Communication Programs Division

Attachments
(2)



APPLICATION FOR DUPLICATE OR PAPERLESS TITLE

DMV USE ONLY		
DLID #	STATE	TECH. INITIALS

- ☐ Duplicate Title (Complete Sections 1 - 3) ☐ Paperless Title Certification (Complete Sections 1 - 3)
☐ Transfer of Title with Duplicate or Paperless Title (Seller completes Sections 1 - 4, New Owner completes Sections 6 and 7, as needed.)

VEHICLE LICENSE PLATE OR VESSEL OF NUMBER	VEHICLE/HULL IDENTIFICATION NUMBER	YEAR/MAKE OF VEHICLE OR VESSEL BUILDER
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SECTION 1 — REGISTERED OWNER(S) OF RECORD — Please print name as it appears on the Title/Registration.

TRUE FULL NAME (LAST, FIRST, MIDDLE, SUFFIX), BUSINESS NAME, OR LESSOR	DRIVER LICENSE/ID CARD NUMBER	STATE
CO-OWNER TRUE FULL NAME (LAST, FIRST, MIDDLE, SUFFIX)	DRIVER LICENSE/ID CARD NUMBER	STATE
PHYSICAL RESIDENCE OR BUSINESS ADDRESS (INCLUDE ST., AVE., ETC.) APT./SPACE/STE. # CITY		STATE ZIP CODE
COUNTY OF RESIDENCE OR COUNTY WHERE VEHICLE/VESSEL IS PRINCIPALLY GARAGED		
MAILING ADDRESS (IF DIFFERENT FROM ABOVE) APT./SPACE/STE. # CITY		STATE ZIP CODE

SECTION 2 — LEGAL OWNER OF RECORD (LIENHOLDER/TITLE HOLDER) — Do not enter name of owners above.

NAME OF BANK, FINANCE COMPANY, OR INDIVIDUAL HAVING A LIEN ON THIS VEHICLE	ELECTRONIC LIENHOLDER ID NUMBER
BUSINESS OR RESIDENCE ADDRESS APT./SPACE/STE. # CITY	ELT #
STATE ZIP CODE	

SECTION 3 — MISSING TITLE STATEMENT — WARNING: Issuance of a duplicate title cancels the original title.

The Certificate of Title issued for this vehicle/vessel is (check box): ☐ Lost ☐ Stolen ☐ Paperless Title
☐ Not Received from Prior Owner ☐ Not Received from DMV (Allow 30 days from issue date) ☐ Illegible/Mutilated (Attach old title)
I agree to indemnify and save harmless the Director of Motor Vehicles for any loss suffered resulting from the issuance of said duplicate Certificate of Title. I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

PRINTED NAME OF OWNER	SIGNATURE OF OWNER	DATE	DAYTIME TELEPHONE NUMBER
	X		()

SECTION 4 — REGISTERED OWNER(S) RELEASE OF OWNERSHIP AND/OR INTEREST

I/we release interest in the described vehicle/vessel. NOTE: The signature of EACH owner is required if co-owners are joined by AND (shown by / on DMV records). The signature for a company or business MUST include the printed name of the company/business and an authorized representative's countersignature on the signature line (e.g., ABC CO., by JOHN SMITH - or - JOSEPH SMITH for ABC CO.).

PRINTED NAME OF OWNER	SIGNATURE OF OWNER	DATE	DAYTIME TELEPHONE NUMBER
	X		()
PRINTED NAME OF OWNER	SIGNATURE OF OWNER	DATE	DAYTIME TELEPHONE NUMBER
	X		()

SECTION 5 — LEGAL OWNER OF RECORD RELEASE OF OWNERSHIP AND/OR INTEREST — Must be notarized.

The undersigned lienholder (legal owner of record) certifies release of interest in the vehicle/vessel. For vehicles 2 model years old and newer, the legal owner (i.e., bank, finance company, etc.) of record must apply for a duplicate title first, and then release interest on the actual title. This section and the Lien Satisfied (REG 166) form cannot be used.

PRINTED NAME OF AUTHORIZED AGENT SIGNING FOR COMPANY	TITLE OF AUTHORIZED AGENT SIGNING FOR COMPANY	DAYTIME TELEPHONE NUMBER
SIGNATURE OF LEGAL OWNER (COMPANY NAME AND AUTHORIZED AGENT'S COUNTERSIGNATURE)		DATE
X		

NOTARY USE ONLY

State of California

County of _____

On _____

before me, _____

(HERE INSERT NAME AND TITLE OF THE OFFICER)

personally appeared _____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

SIGNATURE _____

(SEAL)

THIS SIDE FOR NEW OWNERS – EACH NEW OWNER MUST SIGN BELOW*Complete transfer within 10 days of taking possession of vehicle/vessel.***Must complete vehicle information below:**

VEHICLE LICENSE PLATE OR VESSEL OF NUMBER	VEHICLE/HULL IDENTIFICATION NUMBER	YEAR/MAKE OF VEHICLE OR VESSEL BUILDER
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SECTION 6 — NEW REGISTERED OWNER(S) — Print true full name as shown on Driver License/Identification Card.

If the vehicle was purchased or received from a qualified relative [parent/child, grandparent/grandchild, spouse, domestic partner, siblings (must be minors, related by blood or adoption)], a Statement of Facts (REG 256) form, Statement of Use Tax Exemption, must also be submitted. Once registered, to sell, gift, or otherwise transfer ownership, co-owners joined by "AND (!)" require the signature of each owner; co-owners joined by "OR" require the signature of only one owner.

The signature for a company or business MUST include the printed name of the company/business and an authorized representative's countersignature on the signature line (e.g., ABC CO., by JOHN SMITH - or - JOSEPH SMITH for ABC CO.).

DATE PURCHASED OR ACQUIRED Mo. _____ Day _____ Yr. _____	PURCHASE PRICE \$ _____	OR IF RECEIVED AS A GIFT OR TRADE, CHECK APPROPRIATE BOX AND WRITE THE MARKET VALUE: <input type="checkbox"/> Gift <input type="checkbox"/> Trade \$ _____
TRUE FULL NAME OF NEW OWNER (LAST, FIRST, MIDDLE, SUFFIX), BUSINESS NAME, OR LESSOR		DRIVER LICENSE/ID CARD NUMBER STATE
TRUE FULL NAME OF CO-OWNER OR LESSEE (LAST, FIRST, MIDDLE, SUFFIX) <input type="checkbox"/> AND <input type="checkbox"/> OR		DRIVER LICENSE/ID CARD NUMBER STATE
TRUE FULL NAME OF CO-OWNER OR LESSEE (LAST, FIRST, MIDDLE, SUFFIX) <input type="checkbox"/> AND <input type="checkbox"/> OR		DRIVER LICENSE/ID CARD NUMBER STATE
PHYSICAL RESIDENCE OR BUSINESS ADDRESS (INCLUDE ST, AVE., ETC.) APT./SPACE/STE. # CITY STATE ZIP CODE		

COUNTY OF RESIDENCE OR COUNTY WHERE VEHICLE/VESSEL IS PRINCIPALLY GARAGED	EQUIPMENT NUMBER (OPTIONAL)
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MAILING ADDRESS (IF DIFFERENT FROM ABOVE) APT./SPACE/STE. # CITY STATE ZIP CODE

LESSEE ADDRESS (IF DIFFERENT FROM ADDRESS ABOVE)
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VESSEL OR TRAILER COACH PRINCIPALLY KEPT AT (ADDRESS OR LOCATION - IF DIFFERENT FROM PHYSICAL/BUSINESS ADDRESS ABOVE)	COUNTY
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The above owner mailing address is valid, existing, and an accurate mailing address. I consent to receive service of process at this mailing address pursuant to Section 1808.21 of the California Vehicle Code. I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE(S) OF ALL NEW OWNER(S) X	DATE	DAYTIME TELEPHONE NUMBER ()
SIGNATURE(S) OF ALL NEW OWNER(S) X	DATE	DAYTIME TELEPHONE NUMBER ()
SIGNATURE(S) OF ALL NEW OWNER(S) X	DATE	DAYTIME TELEPHONE NUMBER ()

SECTION 7 — NEW LEGAL OWNER (LIENHOLDER/TITLE HOLDER) — If none, write "None."

Attention ELT Legal Owners: ELT # must be shown and the name and address must be entered exactly as shown on the ELT listing.

TRUE FULL NAME OF BANK/FINANCE COMPANY OR INDIVIDUAL — DO NOT RE-ENTER NAME OF NEW REGISTERED OWNER(S) ABOVE	ELECTRONIC LIENHOLDER ID NO. ELT#
PHYSICAL RESIDENCE OR BUSINESS ADDRESS (INCLUDE ST, AVE., ETC.) APT./SPACE/STE. # CITY STATE ZIP CODE	
MAILING ADDRESS (IF DIFFERENT FROM ABOVE) APT./SPACE/STE. # CITY STATE ZIP CODE	

SECTION 8 — DEALER'S RELEASE OF ACQUIRED VEHICLE

NAME OF DEALERSHIP	NAME OF BUYER	DATE SOLD	R/S NUMBER
SIGNATURE OF DEALER AGENT X	PRINTED NAME OF DEALER AGENT	DEALER NUMBER	SALESPERSON NUMBER
NAME OF DEALERSHIP	NAME OF BUYER	DATE SOLD	R/S NUMBER
SIGNATURE OF DEALER AGENT X	PRINTED NAME OF DEALER AGENT	DEALER NUMBER	SALESPERSON NUMBER



LIEN SATISFIED/LEGAL OWNER/TITLE HOLDER RELEASE

NOTE: If this release accompanies an Application for Duplicate California Title (REG 227), this form must be notarized.

THIS FORM CANNOT BE USED TO RELEASE A LIEN ON VEHICLES 2 MODEL YEARS AND NEWER. The legal owner of record must release interest on the actual Certificate of Title. To obtain a replacement title, use an Application for Duplicate Title (REG 227).

VEHICLE/VESSEL INFORMATION

VEHICLE LICENSE PLATE/CF NUMBER	MAKE/BUILDER	YEAR/MODEL
VEHICLE/VESSEL IDENTIFICATION NUMBER		

REGISTERED OWNER INFORMATION — Please print name as it appears on the Title/Registration or Contract.

LAST NAME	FIRST NAME	MIDDLE NAME
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LIENHOLDER/TITLE HOLDER/LEGAL OWNER OF RECORD RELEASE OF OWNERSHIP AND/OR INTEREST

This is to certify that the lien in the name of the Registered Owner shown above, against the described vehicle/vessel has been fully satisfied and has not been assigned to any other party. The undersigned lienholder (legal owner of record) certifies release of interest in the vehicle/vessel.

NAME OF BANK, FINANCE COMPANY, OR INDIVIDUAL(S) HAVING A LIEN ON THIS VEHICLE		
BUSINESS OR RESIDENCE ADDRESS		APT./SPACE/STE. NO.
CITY	STATE	ZIP CODE
MAILING ADDRESS (IF DIFFERENT FROM ABOVE ADDRESS)		APT./SPACE/STE. NO.
CITY	STATE	ZIP CODE
SIGNATURE OF LEGAL OWNER (COMPANY NAME AND AUTHORIZED AGENT'S SIGNATURE)	DATE	DAYTIME TELEPHONE NUMBER
X		()
PRINTED NAME OF AUTHORIZED AGENT	TITLE OF AUTHORIZED AGENT SIGNING FOR COMPANY	

NOTARY USE ONLY

State of California
County of _____
On _____
before me, _____
(HERE INSERT NAME AND TITLE OF THE OFFICER)
personally appeared _____
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
WITNESS my hand and official seal.
SIGNATURE
X

(SEAL)

